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TTC-PA 650-326-2422

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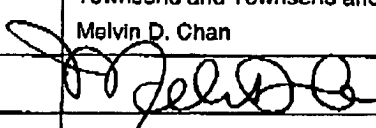
NO. 7023 P. 1/5

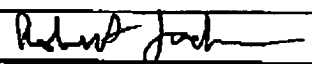
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PTO/SB/21 (08-03)

|  |   |                        |                   |
|--|---|------------------------|-------------------|
| <b>TRANSMITTAL FORM</b><br><i>(to be used for all correspondence after initial filing)</i> |   | Application Number     | 09/923,486        |
|  |   | Filing Date            | August 7, 2001    |
|  |   | First Named Inventor   | Wager, Garrick T. |
|  |   | Art Unit               | 2643              |
|  |   | Examiner Name          | Rexford N. Barnie |
| Total Number of Pages In This Submission   | 5 | Attorney Docket Number | 022395--440900US  |

|   |   |  |
|---|---|--|
| <b>ENCLOSURES (Check all that apply)</b>  |   |  |
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><br><input type="checkbox"/> Extension of Time Request<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><br><input type="checkbox"/> Status Letter<br><br><input checked="" type="checkbox"/> Other Enclosure(s)<br><i>(please identify below):</i><br>Copy of Postcard<br>Copy of Transmittal Form<br>Copy of Revocation of Power of Attorney with Copy of New Power of Attorney and Change of Correspondence Address<br>Copy of Statement Under 37 CFR 3.73b |
| Remarks   |   | The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.   |

|   |   |                 |
|---|---|-----------------|
| <b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b> |   |                 |
| Firm or Individual                                | Townsend and Townsend and Crew LLP<br>Melvin D. Chan                                | Reg. No. 39,626 |
| Signature   |  |                 |
| Date  | November 5, 2004  |                 |

|   |   |                          |
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| I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, Fax No. (703) 872-9306 on November 5, 2004 |   |                          |
| Typed or printed name   | Robert L. Jackson   |                          |
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60350717 v1

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NO. 7023 P. 2/5

**TO THE U.S. PATENT AND TRADEMARK OFFICE**

Please stamp the date of receipt of the following document(s) and return this card to us:

RE: Wager

TITLE OF DOCUMENT(S):

Transmittal Form

Revocation and New POA & Change of Correspondence Address  
Statement Under 37 CFR 3.73(b)

Application No 09/923,486

File No 022395-440900US

Date due

Date Mailed 09-22-04

Atty/Secty. MDC/kaa

60315446 v1

PTO/SB/21 (04-04)

|  |                        |                   |
|--|------------------------|-------------------|
| <b>TRANSMITTAL FORM</b><br><i>(to be used for all correspondence after initial filing)</i> | Application Number     | 09/923,486        |
|  | Filing Date            | August 7, 2001    |
|  | First Named Inventor   | Wager, Garrick T. |
|  | Art Unit               | 2643              |
|  | Examiner Name          | Rexford N. Barnie |
|  | Attorney Docket Number | 022395-440900US   |
| Total Number of Pages in This Submission   |                        |                   |

| ENCLOSURES (Check all that apply)  |  |   |
|--|--|---|
| <input type="checkbox"/> Fee Transmittal Form                                | <input type="checkbox"/> Drawing(s)  | <input type="checkbox"/> After Allowance Communication to Technology Center (TC)        |
| <input type="checkbox"/> Fee Attached  | <input type="checkbox"/> Licensing-related Papers  | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences     |
| <input type="checkbox"/> Amendment/Reply                                     | <input type="checkbox"/> Petition  | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final   | <input type="checkbox"/> Petition to Convert to a Provisional Application                          | <input type="checkbox"/> Proprietary Information  |
| <input type="checkbox"/> Affidavits/Declaration(s)                           | <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter  |
| <input type="checkbox"/> Extension of Time Request                           | <input type="checkbox"/> Terminal Disclaimer   | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):         |
| <input type="checkbox"/> Express Abandonment Request                         | <input type="checkbox"/> Request for Refund  | Return Postcard   |
| <input type="checkbox"/> Information Disclosure Statement                    | <input type="checkbox"/> CD, Number of CD(s)   | PTO Form SB/82  |
| <input type="checkbox"/> Certified Copy of Priority Document(s)              | Remarks  | PTO Form SB/96  |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application    | The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.           |   |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 |  |   |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |                                    |
|--|------------------------------------|
| Firm or Individual name                    | Townsend and Townsend and Crew LLP |
| Signature                                  | Reg. No. 39,626                    |
| Date                                       | 9-17-2004                          |

| CERTIFICATE OF TRANSMISSION/MAILING   |            |      |         |
|---|------------|------|---------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. |            |      |         |
| Typed or printed name   | Tiffany Wu |      |         |
| Signature   |            | Date | 9/22/04 |

60310317 v1

**REVOCATION OF POWER OF  
ATTORNEY WITH  
NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

|                        |                      |
|------------------------|----------------------|
| Application Number     | 09/923,486           |
| Filing Date            | August 7, 2001       |
| First Named Inventor   | Wager                |
| Art Unit               | 2682                 |
| Examiner Name          | Rexford Barnie       |
| Attorney Docket Number | 022395-440900US 4/09 |

I hereby revoke all previous powers of attorney given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

46670

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with  
Customer Number:

46670

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Individual Name

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I am the:

☐ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name Alan D. Minsk

Signature

Date

Telephone

(650) 480-4211

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.

PTO/SB/96 (03-03)

Attorney Docket No. 22395-440900US

**STATEMENT UNDER 37 CFR 3.73(b)**Applicant/Patent Owner: Wager et al.Application No./Patent No.: 09/923,486Filed/Issue Date: August 7, 2001Entitled: Service Zone Management System and MethodOpenwave Systems Inc., a Delaware corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or  
2. ☐ an assignee of less than the entire right, title and interest.  
The extent (by, percentage) of its ownership interest is \_\_\_\_\_ %

In the patent application/patent identified above by virtue of either:

- A. ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_ or for which a copy thereof is attached.

OR

- B. ☒ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: Wagner et al. To: SignalSoft Corporation

The document was recorded in the United States Patent and Trademark Office at Reel 012582, Frame 0519, or for which a copy thereof is attached.

2. From: SignalSoft Corporation To: Openwave Systems Inc.

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3. From: \_\_\_\_\_ To: \_\_\_\_\_

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☐ Additional documents in the chain of title are listed on a supplemental sheet.

☐ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.6]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

9/12/04  
Date

(650) 480-4211  
Telephone number

Alan D. Minsk

Typed or printed name

AKD AM  
Signature

PATENT  
Director and General Counsel

Title

60296217 v1